

October 24, 2006

Los Angeles County Board of Supervisors

Gloria Molina

Yvonne B. Burke Second District

Zev Yaroslavsky Third District

> Don Knabe Fourth District

Michael D. Antonovich
Fifth District

sinci rich strict

TO:

**Each Supervisor** 

FROM:

Bruce A. Chernof, M.D. Officer

Director and Chief Medical Officer

SUBJECT:

Total:

GRADUATE MEDICAL EDUCATIÓN QUARTERLY REPORT THIRD CALENDAR QUARTER (JULY - SEPTEMBER) 2006

The Graduate Medical Education (GME) Quarterly Report for the third calendar quarter of 2006 is attached. Information in the following categories is regularly complied and reviewed by the Office of Clinical Affairs and Affiliations for all Los Angeles County sponsored or co-sponsored residency training programs. Information in the attached reports reflect the following:

I. Total Housestaff Numbers by Facility (Attachment I)

Bruce A. Chernof, MD Director and Chief Medical Officer

> John R. Cochran III Chief Deputy Director

William Loos, MD Acting Senior Medical Officer <u>1,714 (</u>2006-2007)

LAC+USC 917
Harbor-UCLA 462
KDMC 252
OVMC 83

- II. <u>Teaching Institution and Training Program Accreditation Status</u> (Attachment I)
- III. Medical Specialty/Subspecialty Board Certification Results (Attachment II)

313 N. Figueroa Street, Suite 912 Los Angeles, CA 90012

> Tel: (213) 240-8101 Fax: (213) 481-0503

> > www.ladhs.org

Medical specialty board certification results for 2003 through 2005 are updated in this report. The results show an overall increase of 13% in certification achievement since March, 2006. The next verification will occur in March, 2007, to include the final certification achievement results for 2003, and to incorporate new results for 499 housestaff who completed training in 2006.

IV. Status of Facility Compliance with Resident Supervision Guidelines (Attachment III)

To improve health through leadership, service and education.

In fiscal year 2005-06, third quarter, opportunities for improvement continued to exist. Re-audits have been conducted to more closely monitor compliance. Best Practices at facilities demonstrating the highest compliance are shared with facilities who failed to meet the compliance threshold. Corrective action plans continue to be submitted to each facility's governing body and quarterly monitoring continues. Facilities that demonstrated the highest compliance for the first three quarters of fiscal year 2005-2006 have received monetary awards, for their Quality Patient Care Funds, totaling \$140,000.00.

If you have any questions or need additional information, please let me know.

BAC:pd 506:015

Attachments

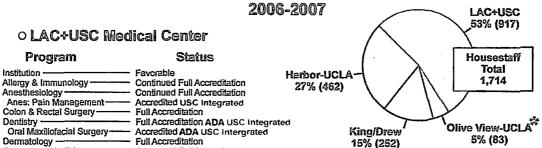
www.ladhs.

c: Chief Administrative Officer

County Counsel

Executive Officer, Board of Supervisors

# Los Angeles County Graduate Medical Education Programs. Accreditation Status and Housestaff Totals



Dermatology Full Accreditation Emergency Medicine Continued Full Accreditation

Family Medicine Continued Full Accreditation USC Integrated

Internal Medicine Continued Full Accreditation Int Med: Cardiovascular Continued Accreditation Int Med: Electrophysiology Initial Accreditation USC Integrated Accredited USC Integrated

Int Med: Card Intervent Int Med: Endo-Diab-Metab Continued Accreditation Int Med: Gastroenterology Continued Accreditation Continued Accreditation Int Med: Geriatrics Int Med: Hematology Continued Accreditation Int Med: Infectious Disease Continued Accreditation Int Med: Nephrology Continued Accreditation Int Med: Oncology Continued Accreditation Int Med: Pediatrics Continued Accreditation

Int Med: Pulmonary Crit Care-Int Med: Rheumatology Continued Accreditation Continued Full Accreditation Full Accreditation Neurological Surgery Neurology
Clinical Neurophysiology Continued Full Accreditation Accredited Full Accreditation Probationary Accreditation Ophthalmology Continued Full Accreditation Orthopaedic Surgery Continued Full Accreditation

Ortho Surg: Hand Accredited Continued Full Accreditation Otolaryngology · Pathology —— Cytopathology Continued Full Accreditation Continued Accreditation Hematopathology Continued Accreditation Neuropathology Continued Accreditation Selective Pathology Initial Accreditation Continued Full Accreditation **Pediatrics** Allergy/Immunology Continued Accreditation Neonatology Continued Accreditation Plastic Surgery Full Accreditation Plastic Surgery Hand Full Accreditation Continued Full Accreditation Continued Accreditation Psych: Forensic Continued Accreditation Radiation Oncology Continued Full Accreditation

Continued Full Accreditation Accredited USC Integrated Accredited USC Integrated Continued Full Accreditation

Full Accreditation Accredited USC Integrated

**Full Accreditation** Full Accreditation

Radiology --Rad: Neuro

Urology

Rad: Vasc/Interv Surgery ·

Vascular Surgery Thoracic Surgery

Surgical Critical Care

# King/Drew Medical Center

Program	Sussus
Anesthesiology Dermatology Emergency Medicine Family Medicine General Dentistry Oral Maxillofacial Surgery Internal Medicine Int Med: Endocrinology Int Med: Gastroenterology Int Med: Geriatrics Medicine Obstetrics & Gynecology Ophthalmology Orthopaedic Surgery Otolaryngology Pediatrics	Continued Full Accreditation Continued Full Accreditation Full Accreditation Full Accreditation ADA Full Accreditation ADA Full Accreditation ADA Full Accreditation ACCRE

### Olive View-UCLA Medical Center

L. O.	อเสเนร
Institution Internal Medicine Int Med & Emergency Med Int Med: Heme-Oncology Int Med: Nephrology Int Med: Rheumatology	

CLA employed housestaff = 83 (County-sponsored, UCLA-employed)

### Harbor-UCLA Medical Center

Program	Status
Institution —	Favorable
Anesthesiology	Continued Full Accreditation
Emergency Medicine	Continued Full Accreditation
Emerg: Ultrasound ————	Accredited
Emerg: Sports Medicine	Accredited
Family Medicine ————	Continued Full Accreditation
Family Med-Sports Med	Accredited
Internal Medicine	Continued Full Accreditation
Int Med: Cardiovascular	Continued Accreditation
Int Med: Card-electro	Continued Accreditation
Int Med: Card-intervent ———	Accredited
Int Med: Dermatology	Provisional Accreditation
Int Med: Endocrinology ———	Continued Accreditation
Int Med: Heme-Oncology	Continued Accreditation
Int Med: Infectious Disease	Continued Accreditation
Int Med: Nephrology	Continued Accreditation
Int Med: Pulmonary Crit Care —	
Int Med: Rheumatology ———	Accredited UCLA Integrated
Neurology	Continued Full Accreditation
Neuro: Child —————	Continued Accreditation w/Warning
Neuro: Neurophysiology ———	Continued Accreditation w/Warning
Obstetrics & Gynecology———	Continued Full Accreditation
Maternal/Fetal	Accredited
GYN Urology	Accredited
Orthopaedic Surgery	Continued Full Accreditation
Ortho Foot & Ankle	Accredited
Pathology	Continued Full Accreditation
Path: Surgical	Accredited
Pediatrics	Continued Full Accreditation
Peds; Critical Care	Continued Accreditation
Peds: Emergency Med	Continued Accreditation
Peds: Endocrinology	Continued Accreditation
Peds: Infectious Disease	Continued Accreditation
Peds: Neonatal	Continued Accreditation w/Warning
Psychiatry	Continued Full Accreditation
Psych: Adolesc	Continued Full Accreditation
Radiology	Continued Full Accreditation
Rad: Body Imaging	Accredited
Rad: Neuro	Continued Accreditation
Rad: Nuclear	Accredited
Rad: Vasc/Interv	Continued Accreditation
Surgery	Full Accreditation
Surg: Vascular	Continued Accreditation
Transitional Year	Continued Full Accreditation

Accredited by the Accreditation Council for Graduate Medical Education (ACGME) Accredited by the American Dental Association (ADA)

# **Glossary of Accreditation Status**

### Accredited

Subspecialties only - A Review Committee confers the status of "Accredited" when the dependent subspecialty program has demonstrated substantial compliance with program requirements

### **Accreditation with Warning**

Subspecialties only - A Review Committee may grant "Accreditation with Warning" when the dependent subspecialty has been found to have one or more areas of non-compliance, with program requirements, that are of sufficient substance to require prompt correction.

### Continued Full Accreditation

"Continued Full Accreditation" status is conferred when a Review Committee determines that a program continues to demonstrate substantial compliance with program requirements

#### **Favorable**

"Favorable" status is conferred when a Review Committee determines that the institution is in substantial compliance with the essential components of Graduate Medical Education

### Full Accreditation

A Review Committee grants "Full Accreditation" when a program holding provisional accreditation or probationary accreditation demonstrates substantial improvement and/or compliance with program requirements

### Initial Accreditation

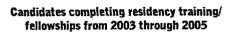
"Initial Accreditation" is conferred when a Review Committee determines that a proposal for a new program substantially complies with all program requirements

### **Probationary Accreditation**

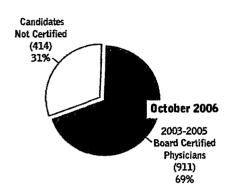
"Probationary Accreditation" is conferred when the Review Committee determines that a program has failed to demonstrate substantial compliance with program requirements

### **Provisional Accreditation**

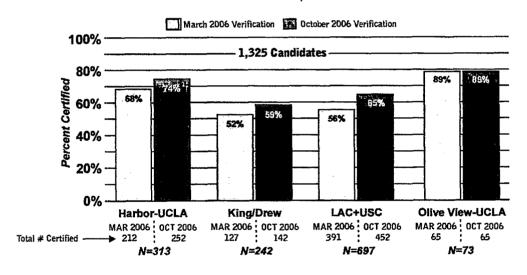
New programs go through a period of "Provisional Accreditation" which implies that a program is in the developmental stage. Provisional Accreditation can be conferred when a program's accreditation was withdrawn and the program has applied for re-accreditation.



## Candidate Total = 1,325



# 2003-2005 Summary Board Certification Verification Results by Facility As of October, 2006



NOTE:

The next verification report, to occur in March 2007, will depict the final certification results for 2003 and incorporate candidates who most recently completed residency and fellowship training in 2006.

Certification Types- General (G), Subspecialty (S)
No Candidates

LAC+USC Medical Center

22020		2003			2004			2005		
Program	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Allergy & Immunology (G)	2	2	100%				2	2	100%	No Limit
Anesthesiology (G)	14	11	79%	11	3	27%	15	4	27%	12 Years
Pain Management (S)							1	1	100%	
Colorectal Surgery (G)	3	2	67%	2	2	100%	3	0	0%	5 Years
Dermatology (G)	2	2	100%	3	3	100%	2	2	100%	No Limit
Emergency Medicine (G)	17	16	94%	18	16	89%	18	7	39%	No Limit
Internal Medicine (G)	50	46	92%	50	48	96%	54	46	85%	No Limit
Cardiovascular Disease (S)	4	3	75%	4	4	100%	4	2	50%	
Endocrinology (S)	3	3	100%	2	2	100%	3	2	67%	
Gastroenterology (S)	2	2	100%	4	4	100%	5	2	40%	
Geriatric Medicine (S)	1	1	100%				2	1	50%	
Hematology & Med Onc (S)	4	4	100%	3	3	100%	3	2	67%	
Infectious Disease (S)	1	1	100%	1	1	100%	2	2	100%	
Nephrology (S)	2	2	100%	4	4	100%	4	4	100%	
Pulmonary & Critical Care (S)	5	4	80%	5	5	100%	4	3	75%	
Rheumatology (S)	2	2	100%	2	2	100%	3	2	67%	
Nuclear Medicine (G)							1	0	0%	No Limit
Neurology (G)	2	2	100%	6	2	33%	5	0	0%	No Limit
Neurological Surgery (G)	2	0	0%				2	0	0%	5 Years
Obstetrics & Gynecology (G)	11	7	64%	12	0	0%	12	0	0%	No Limit
Female Pelvic Medicine (S)							1	0	0%	
Gynecologic Oncology (S)	1	ı	100%							
Maternal-Fetal Medicine (S)	1	1	100%							
Repro Endocrin & Infertility (S)	1	1	100%	1	0	0%	1	0	0%	
Ophthalmology (G)	4	3	75%	5	2	40%	6	0	0%	No Limit
Orthopedic Surgery (G)	9	1	11%	11	0	0%	10	0	0%	No Limit
Ortho Hand Surgery (S)	2	2	100%	1	1	100%	1	0	0%	
Otolaryngology (G)	4	4	100%	4	4	100%	4	3	75%	No Limit
Pathology (G)	4	4	100%	4	4	100%	6	6	100%	5 Years
Cytopathology (S)	4	3	75%	3	2	67%	4	3	75%	
Hematopathology (S)	3	3	100%	1	1	100%	2	0	0%	
Neuropathology (S)							1	1	100%	
Surgical Pathology (S)	2	1	50%				7	0	0%	
Pediatrics (G)	8	7	87%	9	8	89%	14	12	86%	No Limit
Internal Med Peds (S)	13	6	46%	11	2	18%	5	4	80%	
Neonatal-Perinatal (S)	1	1	100%	4	3	75%	2	1	50%	
Plastic Surgery (G)	3	3	100%	3	1	33%	2	0	0%	2 Years
Psychiatry (G)	7	3	43%	7	2	29%	9	0	0%	No Limit
Child/Adolescent Psychiatry (S)	6	3	50%	4	1	25%	8	0	0%	
Forensic Psychiatry (S)	3	1	33%	2	0	0%	3	0	0%	
Radiology (G)	11	11	100%	10	9	90%	9	9	100%	No Limit
Neuroradiology (S)							1	0	0%	
Radiation Oncology (G)	1	1	100%	2	2	100%	1	1	100%	
Surgery (G)	6	5	83%	2	2	100%	8	5	62%	3 Years
Surgical Critical Care (S)	1	1	100%	1	0	0%	2	2	100%	
Vascular Surgery (G)							1	0	0%	
Thoracic Surgery (G)							ī	1	100%	5 Years
Urology (G)	3	2	67%	3	1	33%	3	0	0%	5 Years
TOTALS	225	178	79%	215	144	67%	257	130	51%	

Certification Types- General (G), Subspecialty (S)
No Candidates

# Harbor-UCLA Medical Center

		2003			2004			2005		initial
PROGRAM	Number of	Number	%	Number of	Number	%	Number of	Number	%	CERTIFICATION
	Candidates	Certified	Certified	Candidates	Certified	Certified	Candidates	Certified	Certified	time limit
Anesthesiology (G)	5	3	60%	4	1	25%	5	3	60%	12 Years
Emergency Medicine (G)	14	14	100%	13	13	100%	13	6	46%	No Limit
Family Medicine (G)	12	12	100%	12	12	100%	12	12	100%	No Limit
Sports Medicine (S)							2	0	0%	
Internal Medicine (G)	16	16	100%	16	16	100%	18	17	94%	No Limit
Cardiology (S)							7	6	86%	
Endocrinology (S)							2	2	100%	
Gastroenterology (S)	1	1	100%	3	3	100%	1	1	100%	
Infectious Disease (S)				1	1	100%	2	1	50%	
Intervent Cardiology (S)							1	1	100%	
Nephrology (S)				1	1	100%	-			
Oncology/Hematology (S)							3	3	100%	· · · · · · · · · · · · · · · · · · ·
Pulmonary Disease (S)					7 7 7		2	2	100%	
Rheumatology (S)	1	1	100%	1	1	100%	ī	0	0%	
Medical Genetics (G)	1	1	100%		7		1	1	100%	No Limit
Neurology (G)	4	4	100%	4	4	100%	2	0	0%	No Limit
Neurophysiology (S)							2	0	0%	
Obstetrics & Gynecology (G)	5	2	40%	5	0	0%	5	0	0%	No Limit
Gynecologic Urology (S)	1	1	100%	1	0	0%			- 0,0	140 1111111
Maternal-Fetal Medicine (S)	1	0	0%			3.0	1	0	0%	
Orthopedic Surgery (G)	4	2	50%	4	1	25%	3	0	0%	No Limit
Foot and Ankle (S)				· · · · · · · · · · · · · · · · · · ·			1	0	0%	100 411111
Pathology (G)	2	0	0%	4	4	100%	2	1	50%	5 Years
Surgical Pathology (S)							2	0	0%	2 1003
Pediatrics (G)	10	10	100%	10	9	90%	10	6	60%	No Limit
Emergency Peds (S)						7070	2	<del>- 0</del>	0%	140 Ellille
Neonatology (S)				2	0	0%	2	0	0%	
Peds Critical Care (S)	2	2	100%			0,5	2	0	0%	
Psychiatry (G)	6	5	83%	6	2	33%	- 6	0	0%	No Limit
Child/Adolescent Psychiatry (S)	1	1	100%	1	ī	100%	2	ŏ	0%	NO LIMIT
Radiology (G)	5	5	100%	5	5	100%	5	5	100%	No Limit
Interventional Radiology (S)				ī	0	0%			20073	100 Limit
Neuroradiology (S)	1	1	100%		-		1	0	0%	
Surgery (G)	4	4	100%	3	3	100%	4	3	75%	3 Years
5 7 (/	96	85	89%	97	77	79%	7	70	58%	J icais

Certification Types- General (G), Subspecialty (S)
No Candidates

## King/Drew Medical Center

		2003			2004			2005		initial
PROGRAM	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Anesthesiology (G)	4	2	50%	4	3	75%	6	2	33%	12 Years
Dermatology (G)	2	1_	50%	2	2	100%	2	2	100%	No Limit
Emergency Medicine (G)	13	11	85%	_13	12	92%	11.	4	36%	No Limit
Family Medicine (G)	6	5	83%	8	7	87%	7	7	100%	No Limit
Internal Medicine (G)	13	11	85%	13	11	85%	13	13	100%	No Limit
Endocrinology (S)	1	1	100%	2	2	100%	3	3	100%	
Gastroenterology (S)				1	0	0%	2	2	100%	
Geriatric Medicine (S)	3	1	33%				5	0	0%	
Infectious Disease (S)	2	1	50%	2	1	50%	1	1	100%	
Nephrology (S)	2	1	50%							
Obstetrics & Gynecology (G)	4	1	25%	2	0	0%	4	0	0%	No Limit
Ophthalmology (G)	2	1	50%	2	1	50%	1	0	0%	No Limit
Orthopedic Surgery (G)	2	0	0%	2	0	0%	4	0	0%	No Limit
Otolaryngology (G)	2	2	100%				2	2	100%	No Limit
Pediatrics (G)	12	6	50%	12	4	33%	14	4	29%	No Limit
Psychiatry (G)	3	1	33%	6	0	0%	4	0	0%	No Limit
Radiology (G)	4	1	25%	5	4	80%	Due	18/24b-J		No Limit
Surgery (G)	8	5	62%	6	4	67%	Programs Withdrawn		3 Years	
TOTALS	83	51	61%	80	51	64%	79	40	51%	

### Olive View-UCLA Medical Center

PROGRAW		2003			2004			2005	Initial	
	Number of Candidates		% Certified	Number of Candidates		% Certified	Number of Candidates	Number Certified	, ,,	CERTIFICATION TIME LIMIT
Internal Medicine (G)	18	16	89%	20	19	95%	19	16	84%	No Limit
Hematology & Med Onc (S)	1	1	100%	4	4	100%	1	1	100%	
Int Med & Emer Med (S)				2	2	100%	1	1	100%	
Nephrology (S)				2	2	100%	2	0	0%	
Rheumatology (S)	1	1	100%	1	1	100%	1	1	100%	
TOTALS	20	18	90%	29	28	97%	24	19	79%	

### NOTE

Certification results in the following specialties reflect little change due to additional time required to complete the certification process:

- 1. **Obstetrics and Gynecology** candidates, after passing the qualifying written exam, must provide unsupervised patient care for at least 12 months prior to admission to the certifying oral exam
- 2. **Orthopedic Surgery** candidates must first qualify by passing the written exam. There are two certifying exams. The candidate must pass the oral exam prior to admission to the clinical on-site exam
- 3. **Urology** candidates have two qualifying requirements. After passing the written exam, candidates must engage in a minimum of 18 months of urological patient care before qualifying to sit for the certifying oral exam

# Los Angeles County Department of Health Services Audit of Compliance with Resident Supervision Guidelines DHS Policy Number 310.2

## <u>Fiscal Year 2005-2006 Quarter 3 (January - March)</u> <u>Service-specific Audit Summary</u>

From July through September 2006, nurses from the Department of Health Services' Quality Improvement Patient Safety Program (DHSQIPS) revisited each teaching hospital and abstracted data on fourteen inpatient indicators for patients discharged during the third quarter (January - March) of fiscal year 2005-06. The results totaled over 1,300 data points for resident supervision events. The fourteen indicators included eight that assessed supervision of surgical procedures, three that assessed supervision of intensive care patients, and three that assessed supervision during non-surgical invasive procedures.

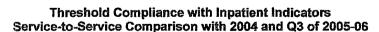
Data was collected from a sampling of hospital discharges with focus on the following services:

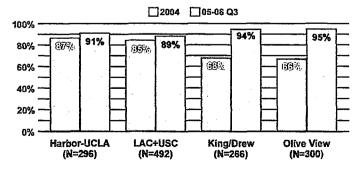
Facility	Services
Harbor-UCLA	Pediatrics Pediatric Surgery Neonatology
LAC+USC	Pediatrics Neonatology Gynecology
King/Drew	Pediatrics Neonatology
Olive View-UCLA	Pediatrics Obstetrics

Sample sizing was based on the projected number of annual discharges per service. Using the service-specific format, not all facilities have medical records for surgical procedures, ward and ICU. Indicators for invasive procedures were not applicable to this cohort.

### **Findings**

System aggregates demonstrated improved compliance for the audited services at all facilities:





## **Findings (continued)**

Opportunities for improvement continue to exist. The eighty percent (80%) threshold was not met for a total of three of the fourteen indicators for services at two facilities:

## Non-compliance with 80% Compliance Threshold

INDICATOR	H-UCLA	LAC+USC	KDMC	OVMC
Daily progress note indicates that it was signed, co-signed or discussed with attending every 48 hours		76%		
Documentation reflects that attending concurs with discharge plan		73%		
The resident documented that he/she discussed the patient with the attending or supervisory resident within 4 hours of admission to the ICU			76%	

## **Next Steps**

Each facility that fails to meet the 80% threshold submits, to the facility governing body, a corrective action plan addressing the deficiency. In some instances serial re-audits have been conducted to more closely monitor the progress of a particular service. Sharing the best practices of facilities demonstrating the highest compliance continues. Facilities demonstrating the highest compliance receive cash bonuses that are awarded to the facility Quality Patient Care Fund or its equivalent. These cash awards are used for the purchase of needed equipment for patient care as described in the Joint Committee of Interns and Residents' Memorandum of Understanding. For the first three quarters of fiscal year 2005-06, a total of \$140,000 was awarded.